

Utah's Division of Child and Family Services

Eastern Region Report

Qualitative Case Review Findings

Review Conducted

April 30 – May 3, 2012

A Report by

The Office of Services Review, Department of Human Services

I. Introduction

The Eastern Region Qualitative Case Review (QCR) for FY2012 was held the week of April 30-May 3, 2012. Reviewers were selected from the Office of Services Review, the Division of Child and Family Services, community partners and other interested parties. Two reviewers from Florida's Department of Child and Family Services participated in the review. Reviewers also included individuals from the following Utah organizations:

- Juvenile Justice Services
- Peer Parents
- Price Quality Improvement Committee
- Office of Licensing
- Boy Scouts of America

There were 20 cases randomly selected for the Eastern Region review. The case sample included 14 foster care cases and six in-home cases. Cases were selected from the Blanding, Castle Dale, Moab, Price, Roosevelt, Ute Family, and Vernal offices. A certified lead reviewer and shadow reviewer were assigned to each case. Information was obtained through in-depth interviews with the child (if old enough to participate), his or her parents or other guardians, foster parents (if child was placed in foster care), caseworker, teacher, therapist, other service providers, and others having a significant role in the child's life. Additionally, the child's file, including prior CPS investigations and other available records, was reviewed.

Staff from the Office of Services Review met with region staff on July 16, 2012 in an exit conference to review the results of the region's QCR. Scores and data analysis were presented to the region.

II. Stakeholder Observations

The results of the QCR should be considered within a broad context of local and regional interaction with community partners. Each year Office of Services Review staff members interview key community stakeholders such as foster parents, providers, representatives from the legal community, other community agencies, and DCFS staff. On April 16 and May 2-3, 2012 members of the OSR staff interviewed individuals and groups of DCFS staff and community partners. DCFS staff who were interviewed included the Regional Director, region administrators, supervisors, and caseworkers. Community partners interviewed included a juvenile probation officer, assistant attorney general, Grand County Middle School tracker, Utah State Representative, drug program administrator, Chamber of Commerce member, Multi-Disciplinary Team, representative of Duchesne County School District, Juvenile Court Judge, Helper City Police Officer, and Utah Foster Care Foundation. Strengths and opportunities for improvement were identified by the various groups of stakeholders as described below. Because the region covers a vast geographic area made up of divergent communities, the comments are divided into three general areas: the Uintah Basin, Price, and Moab/Blanding.

UINTAH BASIN-DCFS Caseworkers

Strengths

There were Resource Family Consultant positions created to support foster parents and caseworkers.

The Transition to Adult Living (TAL) team was enlarged.

The Regional Director has come to the area twice.

There are some problems with Centralized Intake, but overall caseworkers like not having to deal with referrals locally. They like that local bias has been taken out of the process. Having Centralized Intake takes a lot of stress off of the local workers, and local workers don't get in the middle of custody battles anymore.

There are many challenges with the new drug testing provider, but one of the advantages is that it's now possible to verify whether a client called in to see if they had to drug test, and workers can see where they called from.

The Journey Program came into the area and is doing intensive outpatient drug treatment for youth.

Judges are willing to give extensions to the permanency time frame if parents are doing well on their services.

Improvement Opportunities

Referrals are being unaccepted by Centralized Intake due to missing or incomplete addresses.

There are state standards set to determine which CPS referrals are accepted by Centralized Intake, but the quality of service still depends on which intake worker takes the incoming call.

Centralized Intake delays assigning CPS cases to the region, so the priority time frame may expire before the case gets transferred to the region.

Workers don't place much value on the CANS assessment because they don't think the placement indicated by CANS matches what the child really needs. The CANS assessment is only useful to justify a high cost placement.

With the new drug testing contract, clients can't drug test on weekends or get creatinine levels unless the sample is spun, so DCFS doesn't know if the sample has been diluted. The provider doesn't test for everything on the referral and they are slow to provide results. There have been lots of false positives on tests, which has led to children being removed from their homes unnecessarily.

Workers are being assigned cases before they're out of Practice Model training. They can't concentrate on training because they're working on their cases while they're in training. They had a large group of workers start training, but all but three quit before they finished because they were so overwhelmed. Only two workers out of the previous training group made it through training.

Workers are losing the perks that initially attracted them to state employment such as health insurance.

In-home cases don't have the funding for services they need to succeed. It's far easier to get services when children are in foster care because they're paid for with federal dollars rather than state dollars.

Cases in the area aren't open for safety concerns; they're open because youth have poor grades. If youth aren't up to date on school credits, the judge won't let them go home. Foster care shouldn't be a punishment for doing poorly in school.

The carpet gets pulled out from under adoptive families financially after they adopt. People are pressured to adopt, then they get short changed on the support they get afterwards.

UINTAH BASIN-Community Partners

Strengths

Centralized Intake has improved a lot since they first began providing services.

DCFS supervisors in the local offices are fantastic.

DCFS caseworkers are amazing. They really want to make a difference in the lives of the families they work with. Child and Family Team Meetings are well handled. Families are often abusive to workers and act out in anger, but workers don't react.

There is a positive, high functioning relationship between Duchesne County School District, DCFS, and law enforcement. They have created a Multi-Disciplinary Team (MDT) that meets monthly to coordinate work on active cases, talk about specific kids, and determine which entity can provide services. Because DCFS is at the MDT meetings, teachers don't have as many complaints as they used to about not hearing what happened to the referrals they made to DCFS.

Improvement Opportunities

Caseworkers care about their clients, but they're overloaded and they're getting burned out. Their work is not being done as personally or in depth as it used to be done.

The community is afraid of DCFS. They won't call them for help because they're afraid if they call they'll get their children taken away. Workers need to help families understand why they need to investigate child abuse---they're trying to protect kids.

Law enforcement doesn't know if Centralized Intake is working or not because law enforcement doesn't see any of the unaccepted referrals. Law enforcement will look into things DCFS won't such as domestic violence in the presence of children or cases with incomplete addresses. Sometimes law enforcement does the whole investigation without DCFS there because DCFS didn't accept the referral; then DCFS comes on board later and wants to know what happened.

Families need more hands-on help learning how to care for their children and less classroom learning.

The turnover of caseworkers and supervisors has been hard. As soon as DCFS workers get trained and functioning, they leave.

The Uintah Basin needs an inpatient substance abuse treatment program so they don't have to send people to Salt Lake City for inpatient treatment. When parents have to go to Salt Lake, it cuts off their connection with and support from their families.

It is the observation of the substance abuse program coordinator that 90% of the parents DCFS works with relapse after DCFS closes their case. She would like to see DCFS continue random drug testing of parents for another year after the children return home.

The drug testing facility no longer tests on weekends or after 5:00 p.m., meaning working parents must leave work to get tested. DCFS has also been getting false positives on many tests, resulting in inappropriate removals or sanctions against parents.

PRICE-Community Partners

Strengths

The Children's Justice Center (CJC) provides wonderful forensic training. Law enforcement does all of their interviews at the CJC. The interviews are done by CPS workers.

The Helper Police Department's relationship with the schools is great. The schools understand the mandatory child abuse reporting laws.

Helper Police Department promotes DCFS in the community because they believe DCFS is there to teach people how to have better families and change people for the long term.

There's been an increased effort to team with people, especially with new workers. Team meetings have dramatically improved from how they were a year ago. For example, in a recent team meeting, the mother ran the meeting.

The Price QIC Committee is strong and functioning well. It includes representation from the Boy Scouts, Boys and Girls Club, Four Corners Mental Health, Head Start, Children's Justice Center, a local religious congregation, CASA, a former DCFS client, UFCF, nurse, CJC, and a legislator. The QIC is trying really hard to do their job and meet the needs of families. There's a good mixture of DCFS staff and community people.

There is an Inter-Community Council that consists of agencies who offer services in the area. They get together to talk about what they each can do to help particular families.

DCFS staff know the new Regional Director is serious about improving how things are functioning in the region.

Everyone on both legal sides is trying to return kids home if they can. It is the judge's perception that kids are spending less time in care and going home sooner. This is partly because DCFS has lowered the standard of what a fit parent is. Nationwide the expectations of parents are getting very low.

Improvement Opportunities

Law enforcement's biggest complaint is that they can't just call someone at the local DCFS office and get a caseworker to respond because everything has to go through Centralized Intake. Also, Centralized Intake sometimes rejects reports that law enforcement believes should be accepted. Law enforcement believes the number of referrals has gone down because local people don't want to call Salt Lake to report abuse.

Foster parents need to feel valued. The number of foster parents in Carbon and Emery Counties has dropped from 40 to 20, and only 2 of the 20 foster homes remaining are structured homes. This means many children have to be placed on the Wasatch Front. Twenty families isn't enough to accommodate the 100 foster children in Price and Emery Counties. The Utah Foster Care Foundation (UFCF) budget has been cut every year and foster parents have had pay cuts, too. It costs more to put a child in day care than foster parents are paid, so working parents can't afford to be foster parents. Word of mouth advertising by foster parents and satisfaction rates of foster

parents have both declined. The thing that would most help UFCF to recruit new foster parents would be to have current foster parents treated better and supported better by DCFS caseworkers.

The Price QIC has created products such as a Parents' Bill of Rights and a model for reducing UA's, and they've made recommendations such as having experienced foster parents mentor new foster parents, but they're not seeing their work embraced and acted upon by region administration. The QIC is beginning to wonder if they're wasting their time.

MOAB/BLANDING-DCFS Caseworkers

Note-Many of the Moab and Blanding caseworkers did not participate in the stakeholders group because they were attending training. Only two caseworkers and one clinical person were able to attend.

Strengths

Blanding has a Families First program that is an intensive in-home services program like a "super nanny." This woman goes into homes at busy times such as right after school or bedtime and works with the family.

The WIA program is very helpful. WIA provides an internship where youth get paid for on-the-job training. Foster parents have been encouraging foster youth to use the WIA program. For example, WIA is helping one girl go to cosmetology school.

With the new Region Director, the region is coming more in line with the state. There is no longer conflict between how state trainers are telling workers to do things and what the Region Director is telling them to do. Since the change, there's more trust within the region.

Blanding likes the Family Support Teams that have been put in place. There is a supervisor, TAL worker, kinship specialist, and support worker on the team. The team finds a placement for the kids. This takes a lot of strain off the caseworker.

Caseloads are down at the moment. Workers average nine to 10 cases. Workers are able to finish training before they get new cases.

Improvement Opportunities

There has been a lot of turnover the past two years and the offices have been short on workers for much of the time. New caseworkers have been spending a lot of time out of the office because of the large amount of time they are required to spend in training.

Four Corners Mental Health has a monopoly on services because they are essentially the only provider in the area. Perhaps services would improve if they had more competition from the private sector. Four Corners doesn't do a sliding scale anymore and they don't take insurance. That means a large sector of the community can't access their services.

Blanding and Moab's biggest resource need is additional foster homes. Due to lack of local foster homes, kids get sent to foster homes around the state.

The new drug testing contract has been a "fiasco." The judge doesn't like the new drug testing provider and there are questions about the validity of the test results.

MOAB/BLANDING-Community Partners

Strengths

There is good communication between juvenile probation officers and DCFS. They meet once a week and staff cases they have in common. Sometimes probation officers attend Child and Family Team Meetings. That's been good for communication between families, Probation and DCFS.

Individual therapy, parenting classes, and coming in front of the judge are used to get kids to school. They have a youth compliancy project that tracks kids. They are in front of the judge every other week.

For the most part the relationship with the Moab Police Department is good.

There are wrap meetings in Moab that include Four Corners Mental Health, DCFS, court, school, etc. They are working well. They've tried to build more of a team atmosphere than there was in the past.

Improvement Opportunities

Using Detention for Moab cases is very inconvenient because Detention is an hour and a half away in Blanding. If there was a Detention nearby, policy would be more willing to pick kids up. Many times kids don't get cited for things like underage drinking because the police don't want to transport them clear to Blanding.

Caseworkers are too positive and optimistic when parents and kids aren't doing well and they need to be held accountable. For example, if the family can't afford therapy, DCFS just tells them not to worry about doing it.

It's frustrating to call Centralized Intake.

DCFS has had enormous amounts of turnover, which makes it hard to do quality work. Supervisors have had to take cases in addition to mentoring and training caseworkers.

Because there have been so many new workers, there's been a lag in petitions because new workers don't know what needs to be in petitions. There hasn't been a check list or procedure in place to help them.

REGION DIRECTOR, REGION ADMINISTRATORS, AND SUPERVISORS

Strengths

Region administration is more supportive than in the past. Creating Child Welfare Administrator positions has helped.

Eastern Region has started a new kinship team to support kinship families. They've also developed Family Support Teams that consist of a supervisor, kinship worker, adoption worker, and resource family consultant.

Supervisors have put a strong emphasis on Practice Model. They have liked hearing the Regional Director say, "Let's get back to the basics."

The region is getting far fewer Office of Child Protection Ombudsman complaints than they've had in past years, which allows them to focus on day to day casework and the Practice Improvement Plan that's in place. Community members come to meetings with DCFS and feel valued.

Moab and Blanding are working together and feeling more a part of the region, as is Castle Dale. They are all seeing region administrators more frequently in their offices. They don't feel isolated anymore. They all feel more supported. They don't fear state or region administration anymore.

The Domestic Violence program is now in the individual DCFS offices rather than isolated in its own office.

Improvement Opportunities

Retention of caseworkers has been the biggest problem. Eastern Region has lots of new workers and many of them are young workers.

The current drug testing provider is far worse than the previous service, which was a good system. The clinics aren't open on weekends or evenings. They can't check drug levels; they can just get positive or negative results. It takes a long time to get tests back. Test results are sometimes lost. Results come back with both false positives and false negatives. There are also flaws in the chain of custody of the samples. There appear to be disputes between DCFS and TASC over what the contract requires.

The cost of housing in Moab and the Uintah Basin is so high workers cannot afford to live there.

Changes in SSW licensing requirements have made it much more difficult for workers to get licensed. Workers can't afford to take the additional classes that are required or pay for the additional cost of the initial tests.

Centralized Intake is very inconsistent. Whether referrals are accepted or not depends on which Intake worker takes the call. There's an override process in the region, but it's time consuming. The judges want the region to review every unaccepted case. Also, Centralized Intake saves up referrals and sends them to the region in batches, which can cause a significant delay.

III. Child and Family Status, System Performance, Analysis, and Trends

The QCR findings are presented in graphic form to help quantify the observations of the qualitative review. Graphs show a comparison of scores for past years' reviews with the current review. The graphs of the two broad domains of Child and Family Status and System Performance show the percent of cases in which the key indicators were judged to be "acceptable." A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using this rating scale. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status and System Performance are evaluated using 15 key indicators. Graphs presenting the overall scores for each domain are presented below. They are followed by graphs showing the distribution of scores for each indicator within each of the two domains.

Child and Family Status Indicators

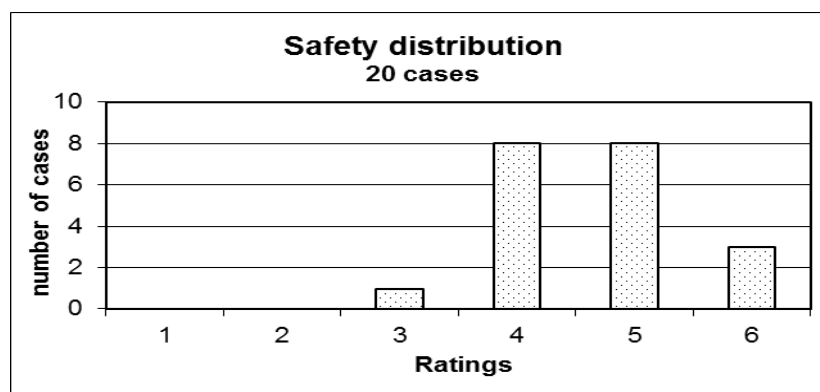
Overall Status

Eastern Child Status									
	# of cases (+)	# of cases (-)	Standard: 70% on all indicators except Safety which is 85% Standard: Criteria 85% on overall score	FY08	FY09	FY10	FY11	FY12 Current Scores	Trends
Safety	19	1	95%	100%	100%	88%	88%	95%	Improved and above standard
Child Safe from Others	20	0	100%				88%	100%	Improved and above standard
Child Risk to Self or Others	19	1	95%				96%	95%	Decreased but above standard
Stability	16	4	80%	83%	79%	75%	75%	80%	Improved and above standard
Prospect for Permanence	12	8	60%	65%	88%	63%	75%	60%	Decreased and below standard
Health/Physical Well-being	19	1	95%	100%	100%	96%	100%	95%	Decreased but above standard
Emot./Behavioral Well-being	14	6	70%	87%	100%	83%	79%	70%	Decreased but above standard
Learning	17	3	85%	91%	92%	92%	83%	85%	Improved and above standard
Family Connections	11	4	73%					73%	Improved and above standard
Satisfaction	17	3	85%	87%	96%	96%	88%	85%	Decreased but above standard
Overall Score	16	4	80%	96%	100%	88%	88%	80%	Decreased and below standard
0% 20% 40% 60% 80% 100%									

Safety

Summative Questions: Is the child safe from threats of harm in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Does the child avoid self-endangerment and refrain from using behaviors that may put self and others at risk of harm?

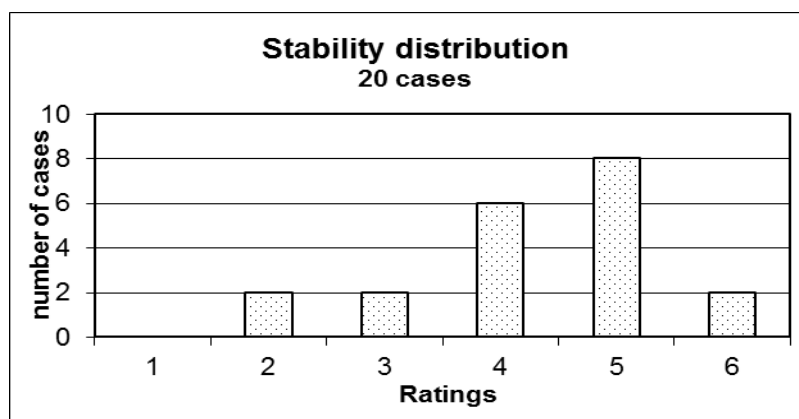
Findings: 95% of cases reviewed were in the acceptable range (4-6). This is an increase from last year's score of 88% and well above standard. Out of the 20 cases reviewed, only one had an unacceptable score on Safety. Even in that case no one was putting the child at risk; the child (a 17-year-old girl) was putting herself at risk by attempting to cut herself and running from the caregiver.



Stability

Summative Questions: Has the child's placement setting been consistent and stable? Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

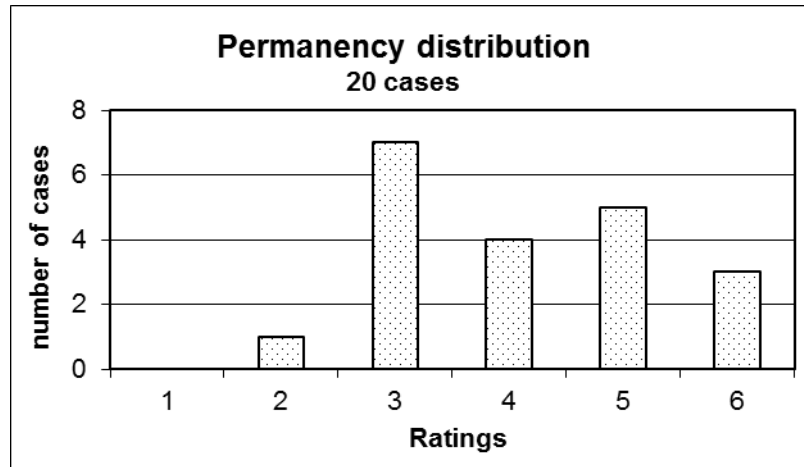
Findings: 80% of cases reviewed were in the acceptable range (4-6). This is an increase from last year's score of 75% and above standard.



Prospects for Permanence

Summative Questions: Is the child living with caregivers that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in enduring relationships that provide a sense of family, stability, and belonging?

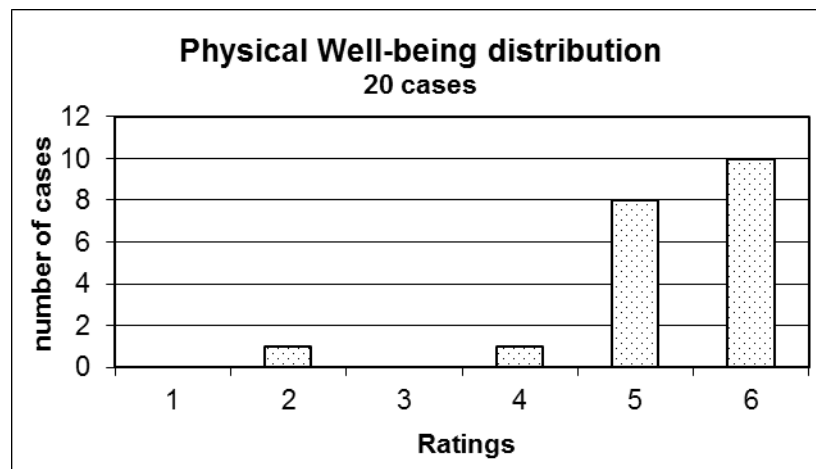
Findings: 60% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 75% and below the 70% standard.



Health/Physical Well-Being

Summative Questions: Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

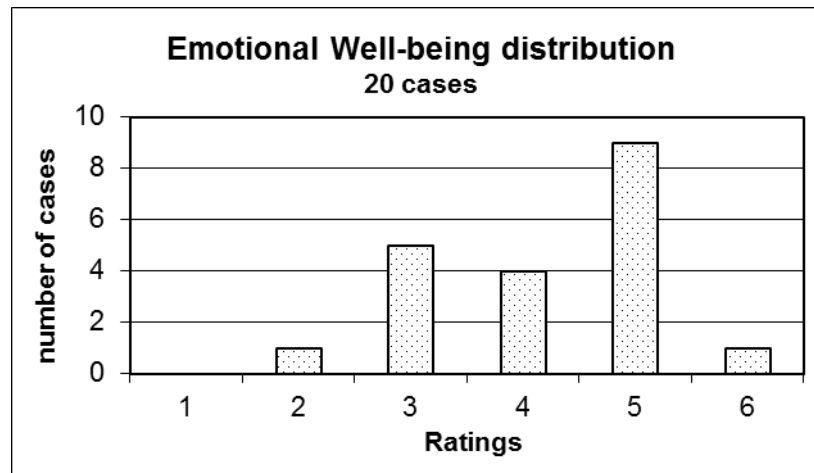
Findings: 95% of cases reviewed were in the acceptable range (4-6). Only one case had an unacceptable score. This was an in-home case; therefore a Fostering Healthy Children nurse was not assigned to the case and the child did not have access to the medical resources that would have been available in foster care.



Emotional/Behavioral Well-Being

Summative Questions: Is the child doing well emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

Findings: 70% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 79% and just meets the standard.

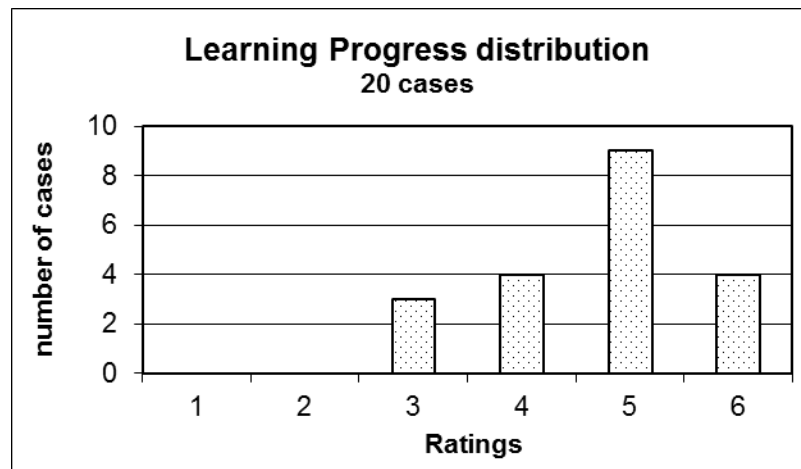


Learning Progress

Summative Question: (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/her age and ability?

Note: There is a supplementary scale used with children under the age of five that puts greater emphasis on developmental progress. Scores from the two scales are combined for this report.

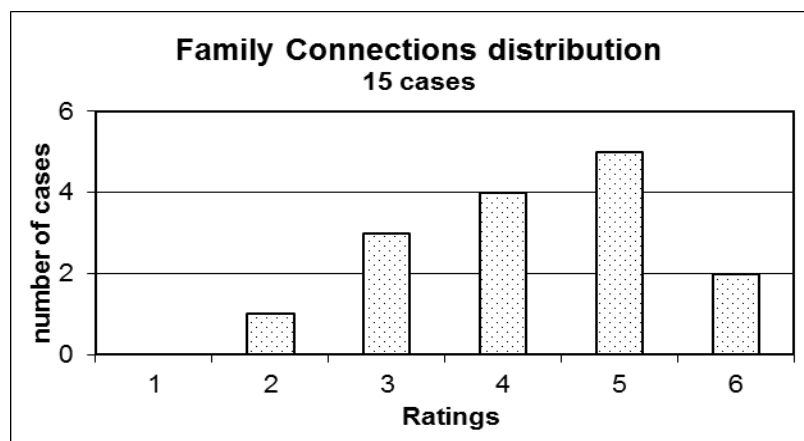
Findings: 85% of cases reviewed were within the acceptable range (4-6). This is slightly better than last year's score of 83% and well above standard.



Family Connections

Summative Question: While the child and family are living apart, are family relationships and connections being maintained through appropriate visits and other connecting strategies, unless compelling reasons exist for keeping them apart?

Findings: 73% of cases scored acceptable on Overall Family Connections. This is a new indicator so there is no comparative data from the previous year. This indicator measures whether or not the relationship between the child and the mother, father, siblings, and other important family members is being maintained. The score for the Siblings was the highest at 80%. The overall score and the score for mothers was slightly lower at 73%. The score for fathers was 0%. The number of cases in which the father was applicable was very low (4), and in all four of those cases the score was unacceptable. Of the 16 fathers that were scored as not applicable, six were in-home cases, five no longer had parental rights, three had unknown identities or locations, and in two cases the therapist felt it was not in the best interest of the child to see their father. The circumstances of the four fathers who were scored were unusual and contributed to the unacceptable scores. One worked in a neighboring state which allowed him little time to visit his child, one was incarcerated, one had been presumed deceased but was recently found to be alive, and the location of the last had just recently been discovered.

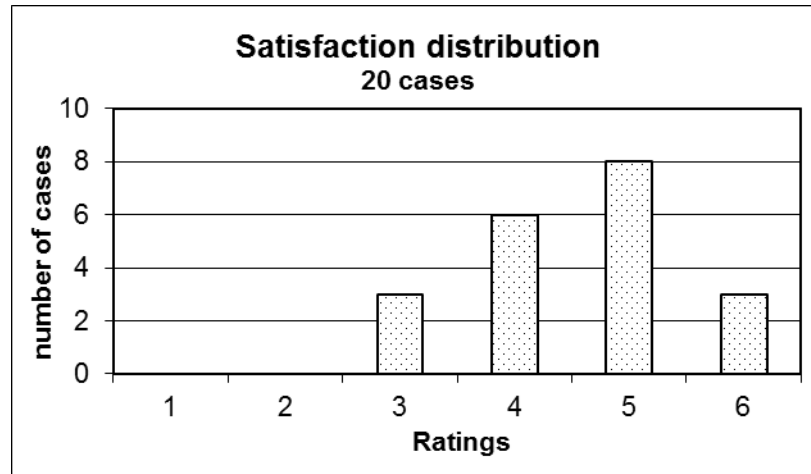


Eastern Family Connections			
	# of cases (+)	# of cases (-)	FY12 Current Scores
Overall Connections	11	4	73%
Siblings	4	1	80%
Mother	8	3	73%
Father	0	4	0%
Other	9	3	75%

Satisfaction

Summative Question: Are the child, parent/guardian, and substitute caregiver satisfied with the supports and services they are receiving?

Findings: 85% of cases reviewed were within the acceptable range (4-6) on the overall Satisfaction score. This is a slight decrease from last year's score of 88%. Reviewers rated the satisfaction of children, mothers, fathers, and caregivers. Scores for the individual parties ranged from 93% for caregivers to 69% for mothers.

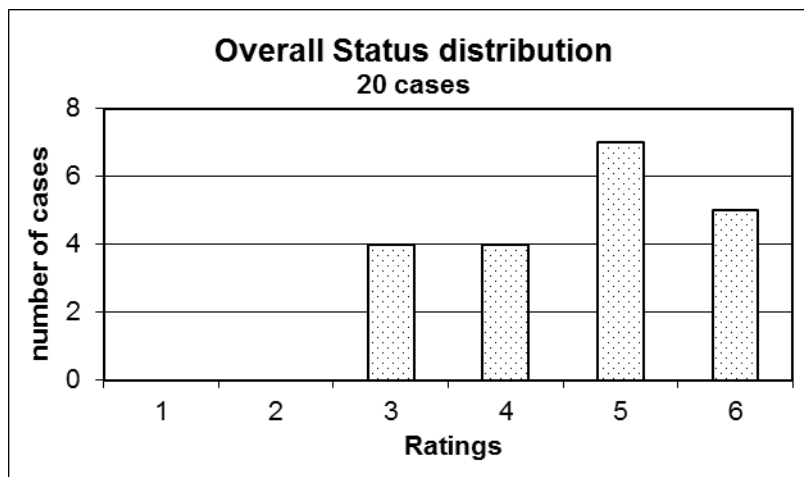


Eastern Satisfaction			
	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Satisfaction	17	3	85%
Child	9	1	90%
Mother	9	4	69%
Father	3	1	75%
Caregiver	14	1	93%

Overall Child and Family Status





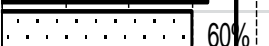

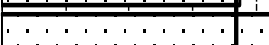

Summative Questions: Based on the Qualitative Case Review scores determined for the Child and Family Status indicators, how well are this child and family presently doing? A special scoring procedure is used to determine Overall Child and Family Status using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the first seven status indicators (minus Satisfaction) must score acceptable in order for the Overall Score to be acceptable. A unique condition affects the rating of Overall Child and Family status in every case: The Safety indicator always acts as a “trump” so that the Overall Child and Family status rating cannot be acceptable unless the Safety indicator is also acceptable.

Findings: 80% of cases reviewed were within the acceptable range (4-6). The overall Child and Family Status score decreased from last year’s score of 88% and fell below the 85% standard.



System Performance Indicators

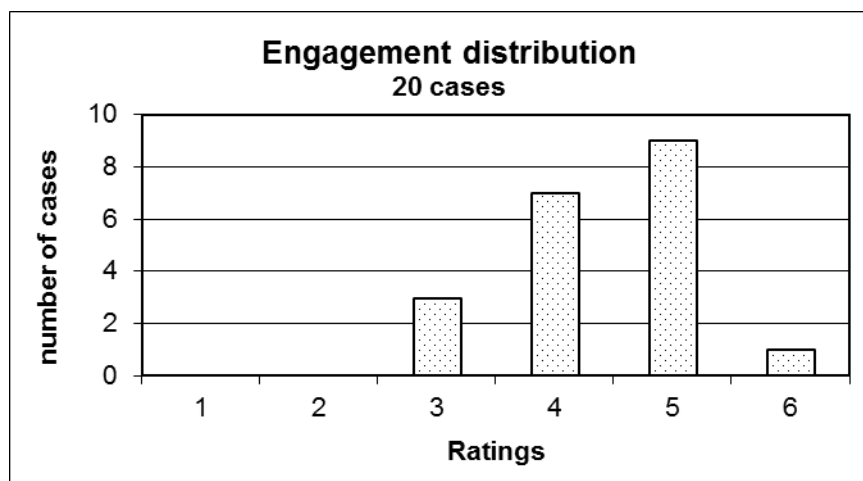
Overall System

Eastern System Performance									
	# of cases (+)	# of cases (-)		FY08	FY09	FY10	FY11	FY12	
			Standard: 70% on all indicators					Current	
			Standard: 85% on overall score					Scores	Trends
Engagement	17	3	 85%	74%	96%	79%	79%	85%	Improved and above standard
Teaming	15	5	 75%	65%	79%	58%	63%	75%	Improved and above standard
Assessment	15	5	 75%	57%	75%	50%	79%	75%	Decreased but above standard
Long-term View	13	7	 65%	65%	88%	46%	58%	65%	Improved but below standard
Child & Family Plan	12	8	 60%	87%	83%	63%	71%	60%	Decreased and below standard
Intervention Adequacy	15	5	 75%	96%	100%	92%	83%	75%	Decreased but above standard
Tracking & Adapting	17	3	 85%	78%	88%	79%	71%	85%	Improved and above standard
Overall Score	15	5	 75%	78%	96%	83%	83%	75%	Decreased and below standard
			0% 20% 40% 60% 80% 100%						

Child and Family Engagement

Summative Questions: Has the agency made concerted efforts to actively involve parents and children in the service process and in making decisions about the child and family? To what extent has the agency used rapport building strategies, including special accommodations, to engage the family?

Findings: 85% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 79% and well above standard. Separate scores were given for child, mother, father and guardian. An overall score was then selected by the reviewer. Scores for the various groups ranged from a high of 100% for the child to 44% for fathers.

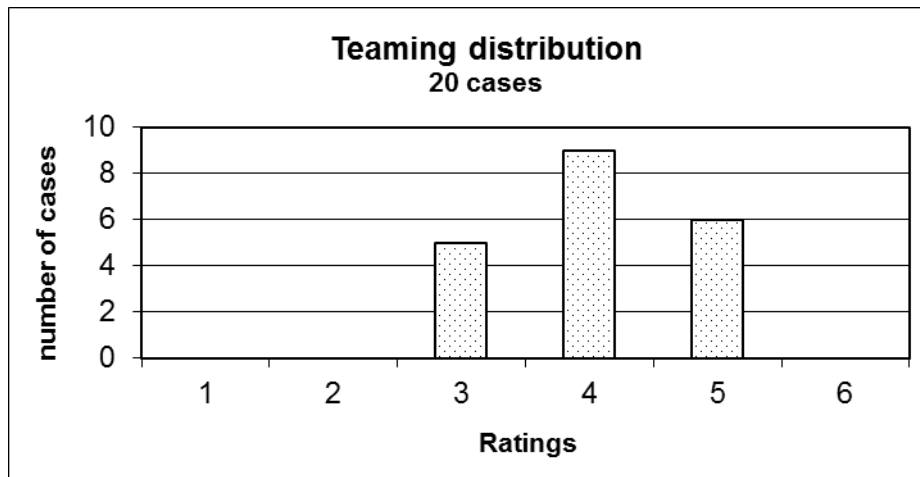


Eastern Engagement			
	# of cases (+)	# of cases (-)	FY12 Current Scores
Engagement	17	3	85%
Child	14	0	100%
Mother	10	3	77%
Father	4	5	44%
Guardian	8	1	89%

Child and Family Teaming

Summative Questions: Do the child, family, and service providers function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination in the provision of services across all providers?

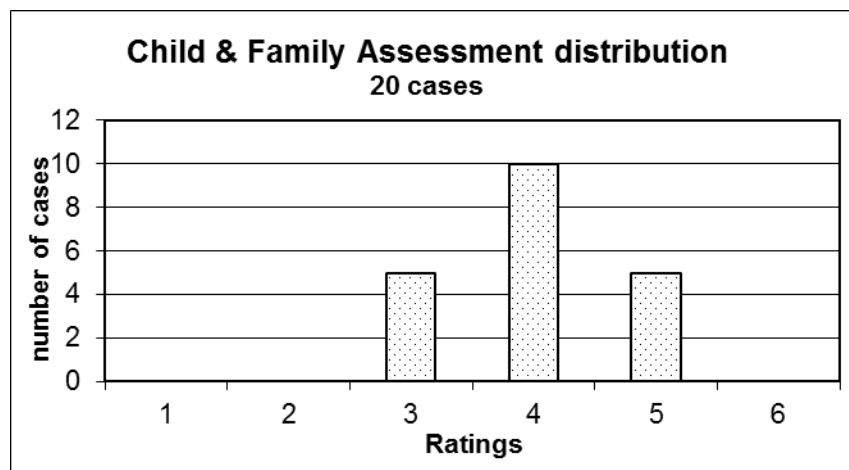
Findings: 75% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 63% and is now above standard.



Child and Family Assessment

Summative Questions: Are the current, obvious and substantial strengths and needs of the child and family identified through existing assessments, both formal and informal, so that all interveners collectively have a “big picture” understanding of the child and family? Do the assessments help the team draw conclusions on how to provide effective services to meet the child’s needs for enduring permanency, safety, and well-being? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family independent of agency supervision or to obtain an independent and enduring home?

Findings: 75% of cases reviewed were in the acceptable range (4-6). This is a slight decrease from last year's score of 79% but still above the 70% standard. Individual scores were given for this indicator. The highest score was the Child's score at 90%. The Caregiver's score was somewhat lower at 79%. Mothers and Fathers scored significantly lower at 62% and 20% respectively.

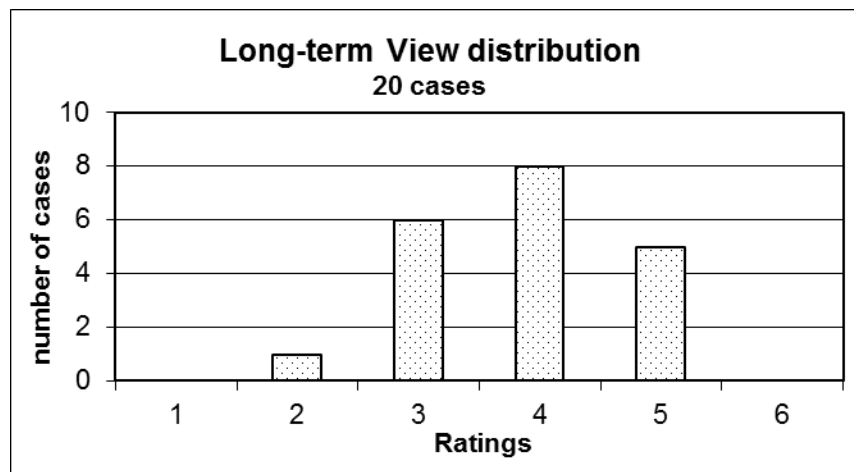


Eastern Assessment			
	# of cases (+)	# of cases (-)	FY12 Current Scores
Overall Assessment	15	5	75%
Child	18	2	90%
Mother	8	5	62%
Father	2	8	20%
Caregiver	11	3	79%

Long-Term View

Summative Questions: Is there a path that will lead the family and/or child toward achieving enduring safety and permanency without DCFS interventions? Is it realistic and achievable? Does the team, particularly the child/family, understand the path and destination? Does the path provide steps and address the next major transition(s) toward achieving enduring safety and permanence independent of DCFS interventions?

Findings: 65% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 58% but still below the 70% standard.

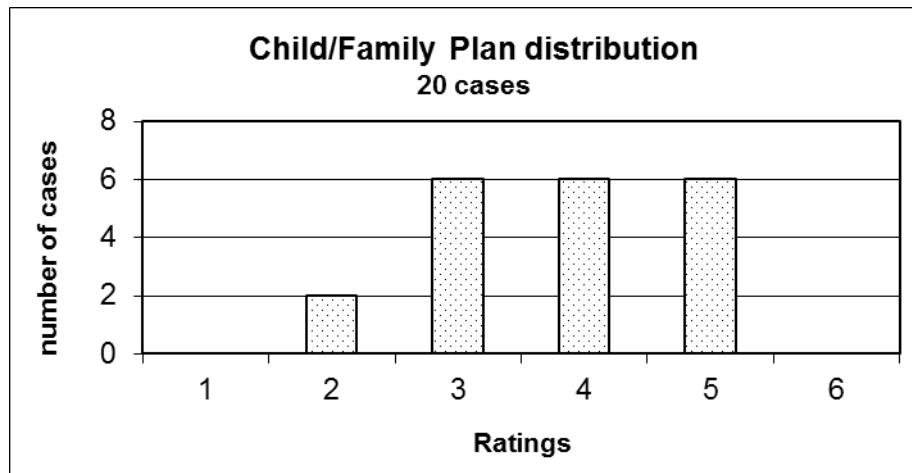


Child and Family Plan

Summative Questions: Is the Child and Family Plan individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and

preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

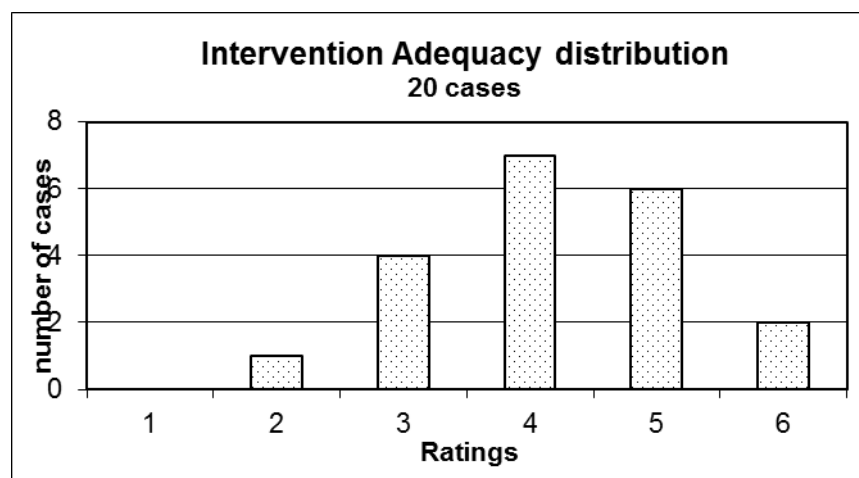
Findings: 60% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 71% and below standard.



Intervention Adequacy

Summative Questions: To what degree are the planned interventions, services, and supports being provided to the child and family of sufficient power (precision, intensity, duration, fidelity, and consistency) and beneficial effect to produce results that would enable the child and family to live safely and independent from DCFS?

Findings: 75% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 83% but still above standard. This indicator was scored separately for Child, Mother, Father, and Caregiver. The scores for Child and Caregiver exceeded the standard at 80%. The score for Mothers and Fathers were substantially lower at 58% and 29% respectively.

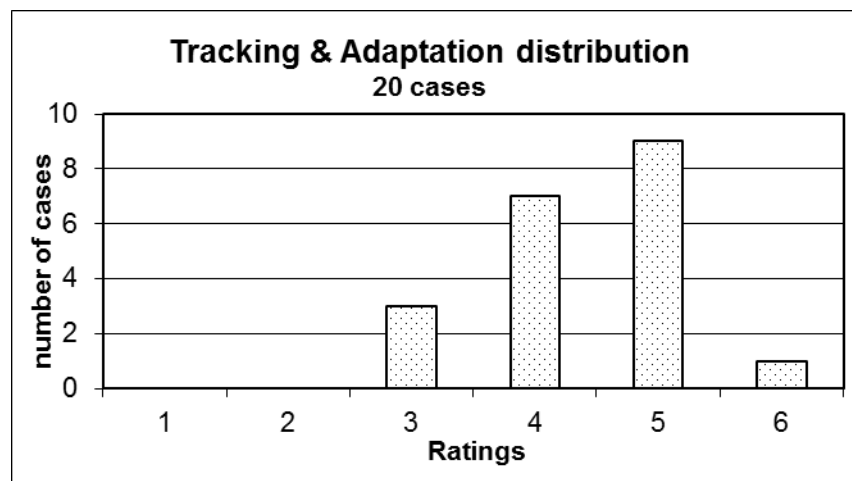


Eastern Intervention Adequacy			
	# of cases (+)	# of cases (-)	FY12 Current Scores
Overall Intervention Adequacy	15	5	75%
Child	16	4	80%
Mother	7	5	58%
Father	2	5	29%
Caregiver	12	3	80%

Tracking and Adaptation

Summative Questions: Are the child and family status, service process, and progress routinely monitored and evaluated by the team? Are services modified to respond to the changing needs of the child and family and to apply knowledge gained about service efforts and results to create a self-correcting service process?

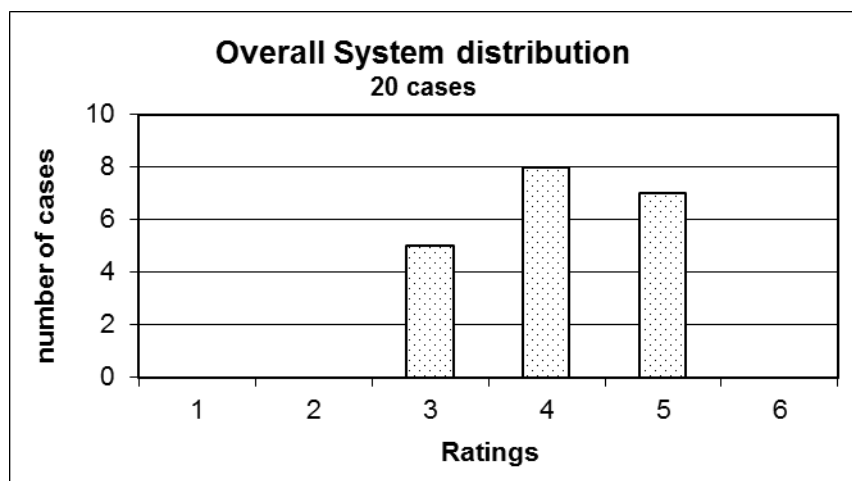
Findings: 85% of cases reviewed were in the acceptable range (4-6). This is a substantial increase over last year's score of 71% and well above standard.



Overall System Performance

Summative Questions: Based on the Qualitative Case Review scores determined for System Performance indicators, how well is the service system functioning for this child now? A special scoring procedure is used to determine Overall System Performance using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the seven system performance indicators must score acceptable in order for the overall score to be acceptable.

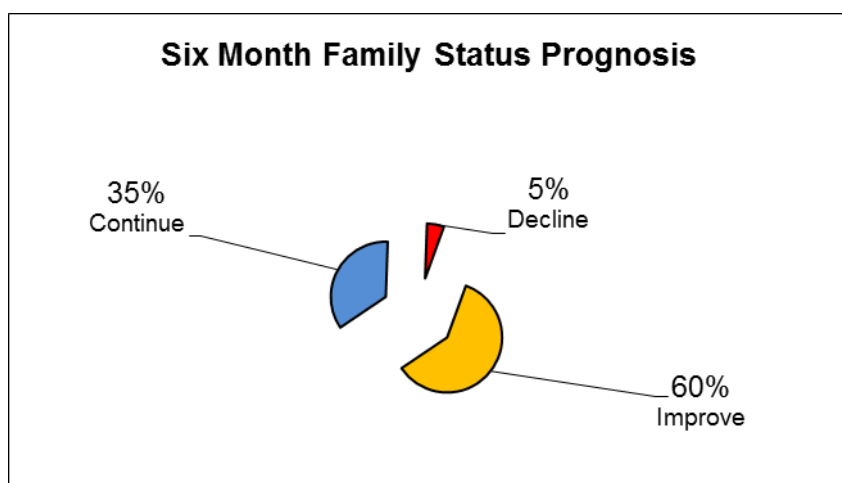
Findings: 75% of cases reviewed were within the acceptable range (4-6). The Overall System Performance score was slightly below the 85% standard last year (83%) and fell further below standard this year.



Status Forecast

One additional measure of case status is the reviewers' prognosis of the child and family's likely status in the next six months, given the current level of system performance. Reviewers respond to this question: "Based on current DCFS involvement for this child, family, and caregiver, is the child's overall status likely to improve, stay about the same, or decline over the next six months?"

Of the 20 cases reviewed, 60% (12 cases) anticipated an improvement in family status over the next six months. In 35% (7) of the cases, family status was likely to stay about the same. There was only one case where the family's status was expected to decline over the next six months.



Outcome Matrix

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

The desired result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often either unusually resilient or resourceful children and families, or children and families who have some “champion” or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well. (These children and families would fall in Outcome 2).

The outcome matrix for children and families reviewed during the Eastern Region review indicates that 60% of the cases had acceptable ratings on both Child Status and System Performance. There was one case that rated unacceptable on both Child Status and System Performance.

Favorable Status of Child		Unfavorable Status of Child	
Outcome 1 Good status for the child, agency services presently acceptable. n= 12 60%		Outcome 2 Poor status for the child, agency services minimally acceptable but limited in reach or efficacy. n= 3 15%	
Outcome 3 Good status for the child, agency Mixed or presently unacceptable. n= 4 20%		Outcome 4 Poor status for the child, agency presently unacceptable. n= 1 5%	
80%		20%	
		75%	
		25%	

V. Analysis of the Data

RESULTS BY CASE TYPE

The following tables compare how the different Case Types performed on some key child status and core system performance indicators. There were no family preservation (PFP/PFR) cases and only one voluntary case (PSC). The court ordered In-Home services cases (PSS) scored 80% on Overall System Performance but only 60% on Overall Child Status. Both of the In-home cases with unacceptable Overall Child Status were 17-year-old girls with truancy issues that had escalated to Safety, Health, and Emotional/Behavioral Well-being issues. Foster Care cases scored somewhat better on Overall Child Status (86%), but scored lower and below standard on Overall System Performance (71%). All key indicators except Intervention Adequacy scored above standard on in-home cases while Long-term View and Child and Family Plan fell below standard on foster care cases.

Case Type	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Foster Care SCF	14	100%	50%	86%	79%	71%	71%	57%	43%	79%	86%	71%
In-Home PSS	5	80%	80%	60%	100%	80%	80%	80%	100%	60%	80%	80%
In-Home PSC	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
In-Home PFP	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

Collection of demographic information regarding cases included in the case sample includes the question, “Did the child come into services due to delinquency instead of abuse and neglect?” Seven of the 20 cases (35%) in the sample are reported to have entered services due to delinquency rather than abuse or neglect. The following table shows that delinquency cases did not score quite as well as non-delinquency cases on Stability or Prospects for Permanency; however, they scored better on Overall System Performance.

Case Type	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
Delinquency	7	71%	57%	57%	86%
Non-Delinquency	13	85%	62%	92%	69%

RESULTS BY PERMANENCY GOAL

The following table compares how the different Permanency Goals performed on some key child status and core system performance indicators. There were five different Permanency Goal types represented in the case sample. Only two of the cases in the sample had the goal of Individualized Permanency, suggesting that only 10% of the cases in the region have this goal, which is noteworthy. Sample sizes are quite small for most of the goals, so below standard scores

are most often due to just one case receiving an unacceptable score. Given the larger sample size, the lower scores on Long-term View and Child and Family Plan for cases with the goal of Reunification are more concerning.

Permanency Goal	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Adoption	4	100%	75%	100%	75%	50%	75%	75%	25%	75%	75%	75%
Guardianship (Non-Rel)	1	100%	0%	100%	100%	0%	0%	0%	0%	0%	100%	0%
Individualized Perm.	2	100%	0%	100%	100%	100%	100%	50%	100%	100%	100%	100%
Remain Home	5	80%	80%	60%	100%	80%	80%	80%	100%	60%	80%	80%
Reunification	8	100%	63%	75%	75%	88%	75%	63%	50%	88%	88%	75%

RESULTS BY CASEWORKER DEMOGRAPHICS

Caseload

The following table compares how caseload affected some key child status and core system performance indicators. Caseloads in the sample were divided into two categories: caseloads of 16 cases or less and caseloads of 17 cases or more. Overall System Performance was identical regardless of caseload size. Overall Child Status varied significantly, but this was partly due to the very small sample size of the workers with large caseloads. The good news is that the sample shows that 80% of the caseworkers have caseloads of 16 cases or less (16 of 20 workers).

Caseload Size	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
16 cases or less	16	94%	56%	88%	88%	81%	75%	69%	63%	75%	88%	75%
17 cases or more	4	100%	75%	50%	75%	50%	75%	50%	50%	75%	75%	75%

Worker Experience

The following table compares how Length of Employment as a caseworker impacts performance. One highlight of the chart is that six of the workers were hired within the past year after the lifting of the hiring freeze. Nearly half of the workers in the sample (9 of 20) had less than two years experience and 75% of the workers had less than five years experience. There was no consistent correlation between the worker's experience and overall performance; the newest and most experienced workers both scored in the 80th percentile on Overall System Performance. The data suggests that an individual worker's level of performance is more of a factor in determining outcomes than the amount of time they have been employed as a caseworker.

Length of Employment in Current Position	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Less than 12 months	6	100%	50%	67%	83%	83%	83%	67%	67%	83%	100%	83%
12 to 24 months	3	100%	100%	100%	100%	100%	100%	100%	67%	100%	100%	100%
24 to 36 months	2	100%	50%	50%	100%	50%	0%	0%	50%	0%	0%	0%
36 to 48 months	2	100%	100%	100%	50%	0%	100%	100%	0%	100%	100%	100%
48 to 60 months	2	50%	0%	50%	100%	50%	50%	50%	50%	50%	100%	50%
60 to 72 months	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
More than 72 months	5	100%	60%	100%	80%	100%	80%	60%	80%	80%	80%	80%

RESULTS BY OFFICE

The following table compares how offices within the region performed on some key child status and system performance indicators. Cases from seven offices in the Eastern Region were selected as part of the sample. Four of the seven offices scored 100% on Overall Child Status, and three of those four (Blanding, Ute Family, and Moab) also scored 100% on Overall System Performance. All but one of the offices had sample sizes of three or less, so unacceptable performance on just one case resulted in a below standard score on an indicator. Of most concern are the scores in the Price office. Although they had the largest sample size, none of the cases had acceptable Overall System Performance. It is noteworthy, however, that 100% of the Price cases had acceptable scores on Teaming.

Office	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Blanding	3	100%	100%	100%	100%	67%	100%	100%	67%	100%	100%	100%
Castle Dale	1	100%	0%	100%	100%	0%	0%	0%	0%	100%	100%	0%
Ute Family	3	100%	67%	100%	100%	100%	100%	100%	67%	100%	100%	100%
Moab	1	100%	100%	100%	0%	100%	100%	100%	100%	100%	100%	100%
Price	6	83%	50%	83%	83%	100%	67%	50%	67%	50%	67%	67%
Roosevelt	3	100%	33%	67%	100%	67%	67%	67%	67%	67%	100%	67%
Vernal	3	100%	67%	33%	67%	33%	67%	33%	33%	67%	67%	67%

RESULTS BY AGE

OSR looked at the effect of age on Stability, Permanency, Overall Child Status, and Overall System Performance. The scores on Stability and Permanency were highest for the youngest children. Ironically, they were lowest for children ages 6-10.

Age	# in Sample	Stability	Prospects for Permanen	Overall Child Status	Overall System Performan
5 years or less	5	100%	100%	100%	80%
6-10 years	6	50%	50%	67%	83%
11-15 years	3	100%	33%	100%	33%
16 + years	6	83%	50%	67%	83%

SYSTEM INDICATORS

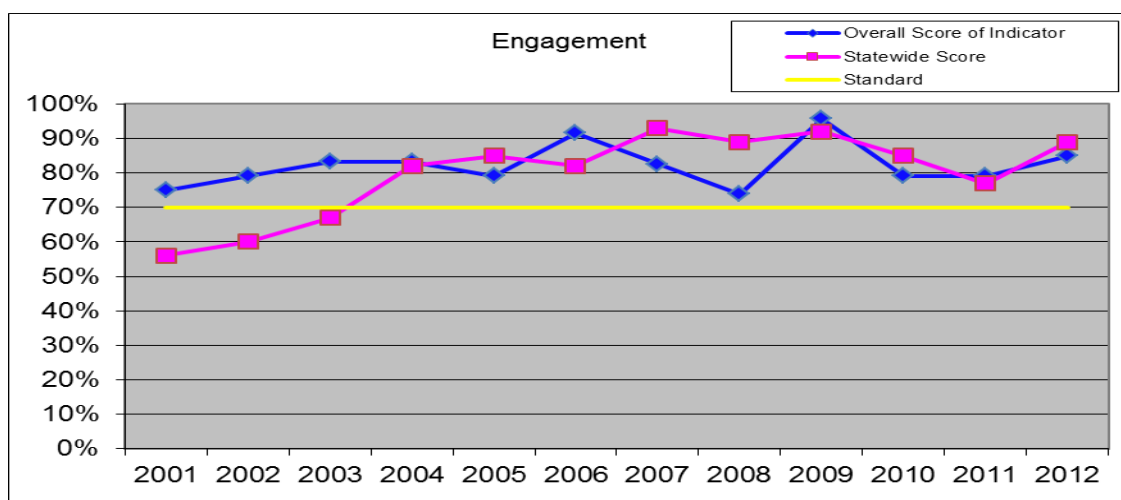
Below is data for all system indicators (Engagement, Teaming, Assessment, Long-term View, Child and Family Plan, Intervention Adequacy, and Tracking and Adaptation) over the last 12 years showing how the ratings of 1 (completely unacceptable), 2 (substantially unacceptable), 3 (partially unacceptable), 4 (minimally acceptable), 5 (substantially acceptable) and 6 (optimal) are trending within each indicator. The table for each indicator in the section below shows an average and percentage score for that indicator. The line graph represents the percentage of the indicator that scored within the acceptable range. The most ideal trend would be to see an increase in the average score of the indicator along with an increase in the percentage score. Statewide scores for FY2012 will not be available until the end of the year and therefore do not appear in the tables or charts.

Eastern region's score on Overall System Performance declined this year. Scores improved on four of the System Performance indicators (Engagement, Teaming, Long-term View, and Tracking and Adapting). The other three System Performance indicators remained the same or declined (Assessment, Child and Family Plan and Intervention Adequacy). Two System Performance indicators scored below standard (Long-term View and Child and Family Plan).

Child and Family Engagement

Both the average and the percentage scores on Engagement showed an increase this year. Eastern region's score on this indicator has mirrored the state score for the past several years.

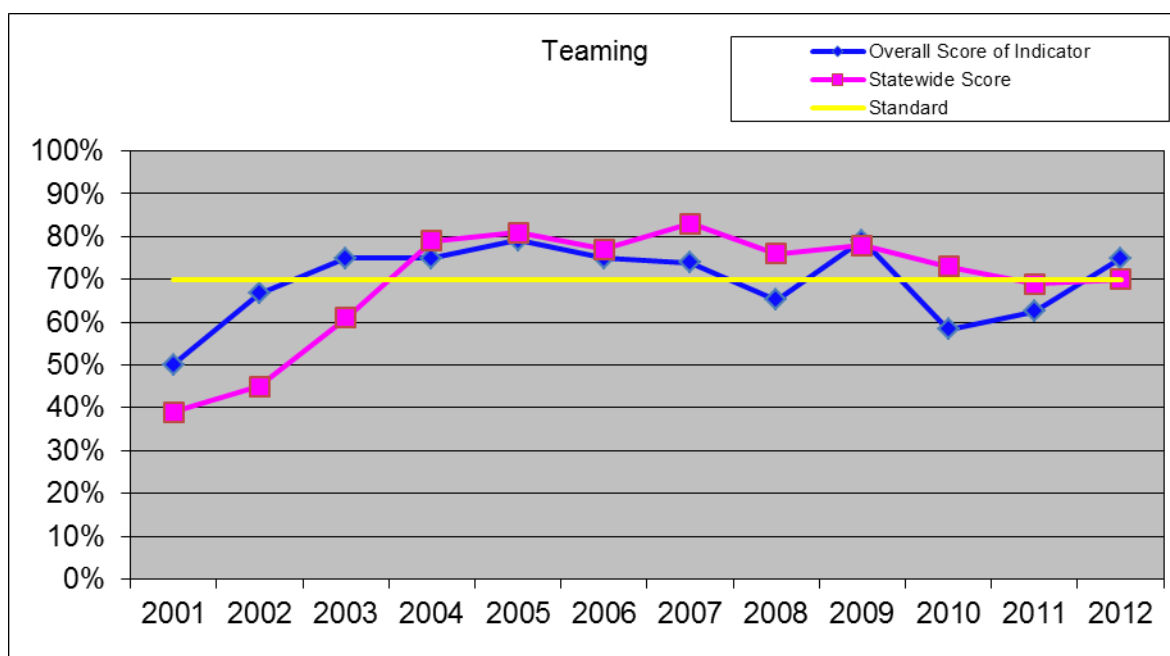
Engagement												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	4.04	4.00	4.29	4.33	4.58	4.42	4.48	4.09	4.67	4.21	4.21	4.40
Overall Score of Indicator	75%	79%	83%	83%	79%	92%	83%	74%	96%	79%	79%	85%
Statewide Score	56%	60%	67%	82%	85%	82%	93%	89%	92%	85%	77%	89%



Child and Family Team and Coordination

The Teaming score rose from 63% to 75%, and the average score rose as well. The region had been lagging the state scores, but exceeded the state score this year. Eastern region also moved from below standard last year to above standard this year.

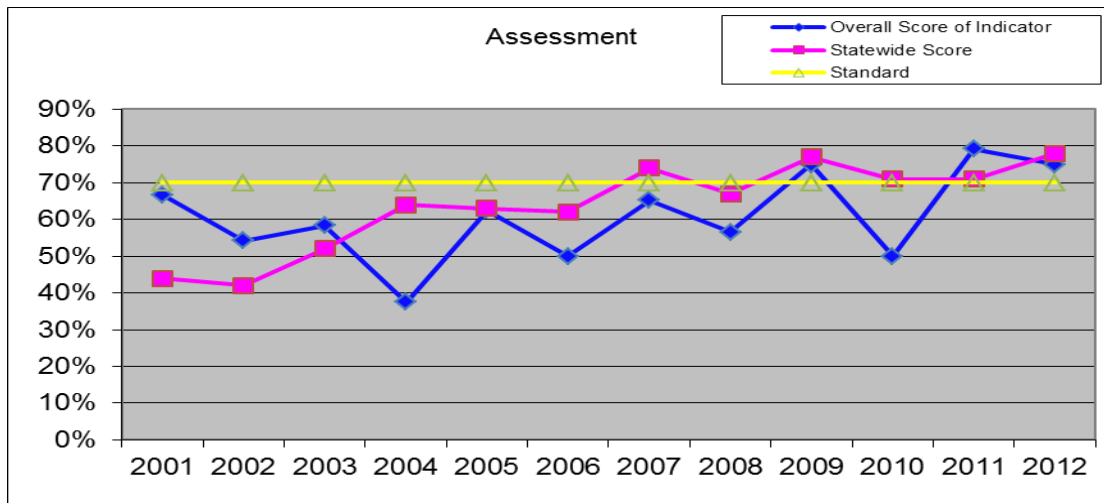
Teaming												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	3.75	3.83	4.08	4.08	4.21	4.04	4.22	3.91	4.42	3.75	3.92	4.05
Overall Score of Indicator	50%	67%	75%	75%	79%	75%	74%	65%	79%	58%	63%	75%
Statewide Score	39%	45%	61%	79%	81%	77%	83%	76%	78%	73%	69%	70%



Child and Family Assessment

Both the average and percentage scores declined slightly this year. Eastern region fell just below the state average but remained above standard.

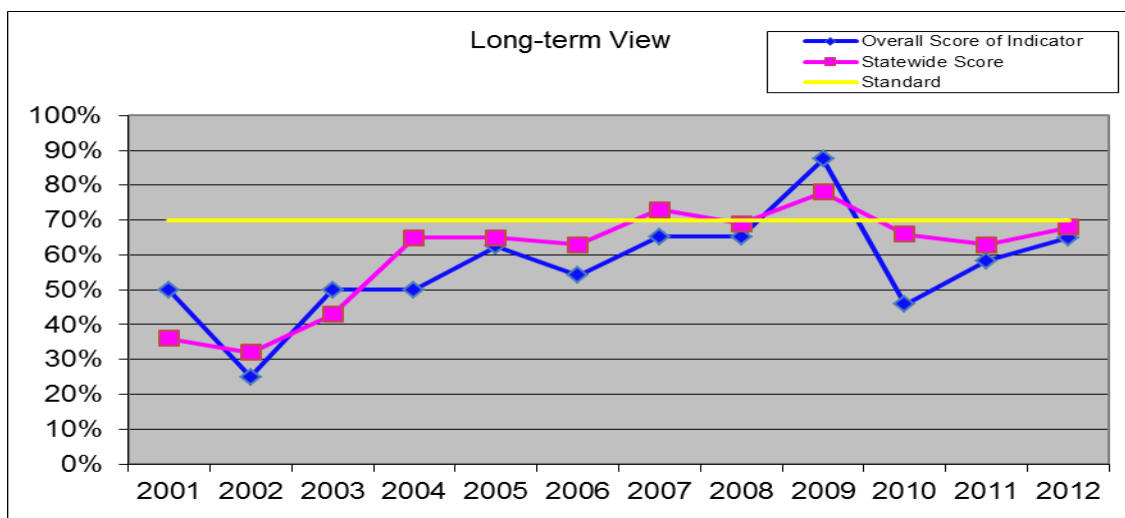
Assessment												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	3.75	3.58	3.92	3.50	3.75	3.63	3.91	3.74	4.13	3.54	4.04	4.00
Overall Score of Indicator	67%	54%	58%	38%	63%	50%	65%	57%	75%	50%	79%	75%
Statewide Score	44%	42%	52%	64%	63%	62%	74%	67%	77%	71%	71%	78%



Long-Term View

Both the average and percentage scores rose this year, but remained short of the standard and slightly below the state average.

Long-Term View												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	3.38	2.92	3.50	3.54	3.67	3.63	3.78	3.65	4.17	3.54	3.71	3.80
Overall Score of Indicator	50%	25%	50%	50%	63%	54%	65%	65%	88%	46%	58%	65%
Statewide Score	36%	32%	43%	65%	65%	63%	73%	69%	78%	66%	63%	68%



Child and Family Plan

After rising just above standard last year, the Plan score fell back below standard this year with an accompanying decline in the average score. The region score was below the state average.

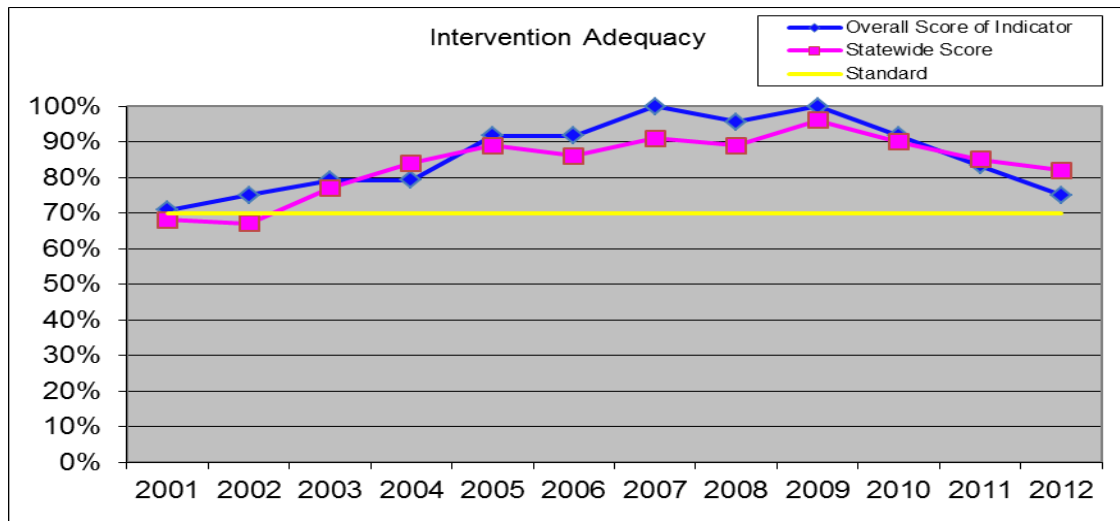
Child and Family Plan												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	3.92	3.63	3.79	3.83	3.88	4.17	4.22	4.13	4.33	3.71	3.96	3.75
Overall Score of Indicator	63%	67%	58%	71%	71%	83%	83%	87%	83%	63%	71%	60%
Statewide Score	42%	52%	62%	72%	76%	75%	88%	78%	78%	72%	62%	67%



Intervention Adequacy

Although the percentage score for Intervention Adequacy fell a little, it remained above standard. Also, the average score rose, meaning that practice was strong on the cases that scored acceptable. The region has been on a downward trend on this indicator since 2009 when the score was 100%.

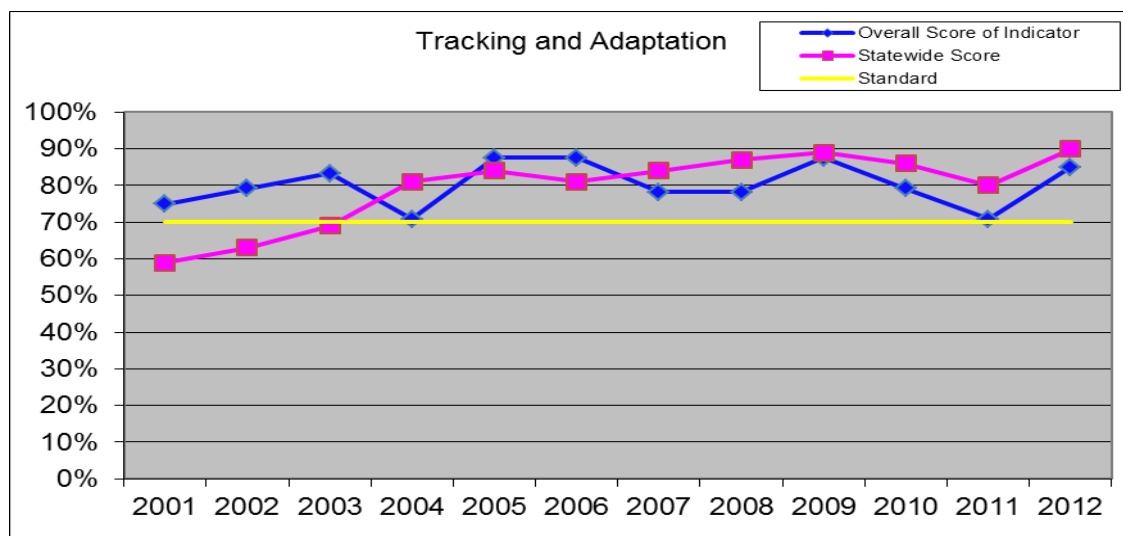
Intervention Adequacy												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	4.00	3.92	4.13	4.17	4.42	4.42	4.74	4.35	4.75	4.21	4.17	4.20
Overall Score of Indicator	71%	75%	79%	79%	92%	92%	100%	96%	100%	92%	83%	75%
Statewide Score	68%	67%	77%	84%	89%	86%	91%	89%	96%	90%	85%	82%



Tracking and Adaptation

Both the percentage and the average scores for Tracking and Adapting rose this year. The average score is well above standard but below the state average.

Tracking and Adaptation												
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Average Score of Indicator	4.13	4.21	4.25	4.08	4.42	4.33	4.52	4.26	4.71	4.17	4.17	4.40
Overall Score of Indicator	75%	79%	83%	71%	88%	88%	78%	78%	88%	79%	71%	85%
Statewide Score	59%	63%	69%	81%	84%	81%	84%	87%	89%	86%	80%	90%



V. Summary and Improvement Opportunities

Summary

During the FY2012 Eastern Region Qualitative Case Review (QCR), numerous strengths were identified about child welfare practice in the Eastern Region. It is clear that there is significant commitment and hard work devoted to ensuring the safety and well-being of the children and families. During the QCR review, a few opportunities for practice improvement were also identified that could improve and enhance the services being provided.

Child Status

Eastern Region fell just below standard on Overall Child Status with a score of 80%, meaning four of 20 cases had an unacceptable overall outcome. One of the cases involved a 17 year old who was putting herself at risk, resulting in an unacceptable Safety score, but she also had unacceptable scores on four other Child Status indicators, so the Safety score did not act as a trump. All four cases had unacceptable scores on Emotional/Behavioral Well-being and three of the four had unacceptable scores on Stability, Permanency, and Learning. Two of these cases were in-home cases, and both of them involved 17 year olds who were receiving services due to truancy.

Eastern Region achieved scores in the 90th percentile on Safety and Health/Physical Well-being. Indicators that scored in the 80th percentile included Stability, Learning, and Satisfaction. Achieving a score of 80% on Stability is very difficult and particularly commendable. The only Child Status score that fell below standard was Prospects for Permanency (60%).

System Performance

After achieving Overall System Performance of 96% in FY2009, Eastern Region has scored below standard for the past three years, falling to 75% this year. Five of the seven System Performance indicators were above standard, but Long-term View and Child and Family Plan fell below standard (65% and 60% respectively). Eastern Region had very good scores on Engagement and Tracking and Adapting (both 85%). They also had a nice improvement in Teaming (from 63% to 75%).

Improvement Opportunities

Child Status

Both the reviewers' comments about the lack of attention to children's needs in the plans and the number of cases (four) that had unacceptable Overall Child Status point to a need for increased attention to the physical, emotional, and learning needs of children, whether they are in foster care or living at home. The concerns expressed in interviews with stakeholders about youth coming into care due to truancy issues were reflected in the QCR cases as two of the four cases with unacceptable outcomes on Overall Child Status were essentially truancy cases.

Permanency was the only Child Status indicator that fell below standard. There were eight cases that received unacceptable scores. One case was an in-home case in which a teenager had just been ordered into foster care by the judge within a day or so of the review. The other seven cases were foster care cases. Most of these cases appeared to have scored unacceptable due to a fundamental lack of attention to permanency planning. For example, one child had been in an adoptive home for years, but barriers to adoption were not being addressed. In another the permanency plan appeared to be unrealistic and was not supported by the caseworker. In another a probable kinship placement wasn't being explored. In other cases the permanency plan was completely up in the air although the child was on the verge of a placement change. In at least a couple of the cases reviewers felt that had more attention been paid to permanency, the child might have achieved permanency by the time of the review.

System Performance

Long-term View

In-home cases performed very well on Long-term View. Only one of the six in-home cases had an unacceptable score. This was the case of a 17 year old who was not succeeding in school, and the team was conflicted about the youth's ability to be successful on her own. Six of the seven unacceptable scores were on foster care cases. The reviewers didn't see teams answering the question of what permanency would look like for the child, nor were they confident the family would achieve independence from DCFS after the case closed. The following comments are representative of these cases:

- The child wants to be adopted, but the foster parents are backing away from adoption. Team members are concerned the child will never have permanency but will end up in the legal system.
- Although reunification services were to be terminated in a couple of days, there was no clear plan for permanency for the target child. The concurrent permanency goal is adoption, but a placement hasn't been identified.
- If the child is returned to mother, there are no clear supports planned or in place to help her be successful and not have subsequent episodes with DCFS.
- It seems to be clear to the team that the mother and son will be together once DCFS closes the case. With this in mind, there must be some plans developed and implemented so as to prepare for this eventuality.
- Several of the team members reported that they feel the primary goal of individualized permanency is not in the target child's best interest, but there is no other real option at this time. Many seemed more hopeful than expectant that the child and family would be able to achieve enduring permanency and independence from DCFS.
- The family reports the target child is going home by the permanency hearing in one month, but this does not appear to be in the best interest of the child. Several issues

remain that will threaten the safety of the child. It doesn't appear the caregiver has a clear understanding of the commitment or resources needed to raise a child.

Focusing the team on permanency and asking the right questions about what is being done to establish a safe and permanent home for the child, free from future DCFS interventions, would help the team visualize the destination and establish some steps to achieve the long-term view.

Child and Family Plan

The Plan indicator scored below standard at 60% due to eight cases receiving unacceptable scores. Three of these cases had the goal of Adoption. Reviewers described these plans as very generic. They either relied entirely on the Need 1 statement that is automatically generated by SAFE or they missed important needs of the child and/or caregiver. Reviewers also noted that these plans didn't describe the steps or timeframe to accomplish adoption.

Half of the cases with the goal of Reunification had unacceptable scores on Planning. These cases had similar issues in that the children's needs were not addressed beyond the Need 1 statement. An additional issue was that reunification plans were not updated as circumstances changed or parents made progress even though new plans were generated in SAFE.

In-home cases were very strong on Planning. Of the six in-home cases in the sample, all received acceptable Planning scores (100%) and four of the six cases received a score of 5.

Possible Next Steps toward Practice Improvement

1. Focus each Child and Family Team's attention on what permanency will look like for the child, what the steps are to get there, and what the concurrent permanency plan is if the primary permanency goal cannot be accomplished.
2. Help caseworkers craft plans in adoption cases that outline how the adoption will be accomplished and what supports and services will be available to the family after adoption.
3. Emphasize the importance of updating the content of Child and Family Plans throughout the life of the case so the Plan is a dynamic document that perpetually guides case planning. Use resources available in the region to help other caseworkers master this skill with minimal expenditure of time.
4. When writing Child and Family Plans, pay attention to the specific needs of the target child without undue reliance on the generic language generated by SAFE.